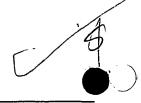
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



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(Depositor's nam (Signature) (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/700,417	11/29/2000	Tony Kouzarides	620-118	3566	

TITLE OF INVENTION: ASSAYS, METHODS AND MEANS FOR MODULATING E2F ACTIVITY

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	-	\$0	\$1330	09/27/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS		
CANELLA	435-006000			_		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			names of u agents OR, firm (having agent) and	ing on the patent front page up to 3 registered patent alternatively, (2) the name g as a member a registered the names of up to 2 regist agents. If no name is list ed.	attorneys or 1 NIX(c of a single d attorney or stered patent	ON & VANDERHYE P,C

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CHROMA THERAPEUTICS LIMITED

OXFORDSHIRE, UNITED KINGDOM

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a. The following fee(s) are enclosed:	4b. Payment of Fcc(s):							
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorize	d Sig	nature) (Moess	. Lu	W 19	Date	e)		
Mary	J.	mature) (\Wilson	, Reg.	No.	32,95	55	9/24/	2004	
NOTE; Tother that	The Is in the	ssuc Fee and applicant; a	Publication registered	Fee (if attorney	required) or agent;	will not or the	be accept assignee o	ted from or other	anyo party

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